E FEE EXTRA: ARGEA DENT CL	STAGE FEES  EE  SPEC. PGS.  BLE CLAIMS	1-1-7	T. = \$ 150  Article 33(1)-0/\$ 100  \$ 50/\$ 100  ountries =	LARG All off		SMAL TYPE RA BASIC I	TE EE	TITY FEE	OR	OTHER SMALL RATE BASIC FEE EXAM. FEE	
E FEE EXTRA: ARGEA DENT CL	SPEC. PGS. BLE CLAIMS	SMALL ENT  Satisfies PCT  (4) = \$ 50  U.S. is ISA =  ALL other C  \$ 200 / 3	T. = \$ 150  Article 33(1)- 0 / \$ 100  \$ 50 / \$ 100  ountries = \$ 400	LARG All off	E ENT. = \$ 300 er situations = 100 / \$ 200 er situations =	RA BASIC I	TE EE			RATE BASIC FEE	ENTITY
E FEE EXTRA: ARGEA DENT CL	SPEC. PGS. BLE CLAIMS	Satisfies PCT / (4) = \$ 50 U.S. is ISA = ALL other cc \$ 200 / :	Article 33(1)- 0 / \$ 100 \$ 50 / \$ 100 buntries = \$ 400	All of	er situations = 100 / \$ 200	BASIC	EE	FEE	OR	BASIC FEE	310
FEE  EXTRA: ARGEA DENT CL	SPEC. PGS. BLE CLAIMS	Satisfies PCT / (4) = \$ 50 U.S. is ISA = ALL other cc \$ 200 / :	Article 33(1)- 0 / \$ 100 \$ 50 / \$ 100 buntries = \$ 400	All of	er situations = 100 / \$ 200	-			OR		300
FEE  EXTRA:  ARGEA  BENT CL  DEPEN	SPEC. PGS. BLE CLAIMS	(4) = \$50 U.S. is ISA = ALL other co \$ 200 / 3	0 / \$ 100 \$ 50 / \$ 100 bunkries = \$ 400	All off	100 / \$ 200 er situations =	EXAM. I	FEE			EXAM. FEE	175
EXTRA : ARGEA DENT CL	BLE CLAIMS	U.S. is ISA = ALL other oc \$ 200 / 3	\$ 50 / \$ 100 ountries = \$ 400					<del> </del>			NU
ARGEA PENT CL DEPEN	BLE CLAIMS	1-1-7	nus 100 =		All other situations = \$ 250 / \$ 500		H FEE			SEARCH FEE	400
DENT CL		16 m			/ 50 =	X \$ 1	25 =	:	1	X \$ 250 =	
DEPEN	AIMS .		/ minus 20 = .			X\$:	25 =		OR	X \$ 50 =	
		minus 3 = .				X \$ 1	00 =		<u>or</u>	. X \$ 200 =	-
ference	DENT CLAIM PRE	ESENT			X	+\$1	80 =		OR	+\$360=	366
If the difference in column 1 is less than zero, enter "0" in column 2						тот	AL		OR	TOTAL	13/
<u></u>	(Column 1)  CLAIMS REMAINING AFTER AMENDMENT	AMENDED	(Colum HIGHE NUMB PREVIOU PAID F	st ER USLY	(Column 3) PRESENT EXTRA	SMA	$\neg$	ADDI- TIONAL FEE	OR	OTHER SMALL E RATE	
	•	Minus	••		=	X \$ 2	5 =		OR	X \$ 50 =	
ndent	•	Minus	***		=	X \$ 10	00 =		OR	X \$ 200 =	
T PRES	ENTATION OF M	ULTIPLE DEP	ENDENT C	LAIM		+ \$ 18			OR	+ \$ 360 =	
						TOTAL A			OR	FEE	
	(Column 1)				(Column 3)						
	REMAINING AFTER		PREVIOU	ER ISLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
		Minus	**	=		X \$ 2	5 =	-	OR	X \$ 50 =	
ndent	•.	Minus	***	=		X \$ 10	0=		OR	X \$ 200 =	·
AMENDMENT PAID FOR  Total Minus =   Independent Minus =   FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 18	0 =		OR	+ \$ 360 =	
	<del></del>								OR	TOTAL ADDIT. FEE	
r Presi				· ·	<u> </u>	TOTAL A	DOIT.		i.	TOTAL ADDIT.	
_	PRESE	CLARAS REMAINING AFTER AMENDMENT  dent  PRESENTATION OF MU  In column 1 is less than the rest Number Previously Pald	CLARMS REMAINING AFTER AMENDMENT  Minus  Minus  PRESENTATION OF MULTIPLE DEPL  In column 1 is less than the entry in column test Number Previously Paid For IN THIS SE	CLAMS REMAINING AFTER AMENDMENT  Minus  **  Minus  **  PRESENTATION OF MULTIPLE DEPENDENT CL  In column 1 is less than the entry in column 2, write "0" in less than the entry in column 2 is less to less than the entry in column 2.	CLARIS REMAINING AFTER AMENDMENT  Minus  **  Minus  **  PRESENTATION OF MULTIPLE DEPENDENT CLAIM  In column 1 is less than the entry in column 2, write "0" in column 3  rest Number Previously Paid For" in THIS SPACE is less than "20".	CLARMS REMAINING AFTER AMENDMENT  Minus  ***    Minus    Minus	CLAMS REMAINING AFTER AMENDMENT  Minus  **   FRESENT   PRESENT   PAID FOR    **   Minus  **   =    X \$ 25  X \$ 10  PRESENTATION OF MULTIPLE DEPENDENT CLAIM      In column 1 is less than the entry in column 2, write "0" in column 3.  **   Total Aid Feet    **   Total Aid Feet	CLAMS REMAINING AFTER AMENDMENT  Minus  **  Minus  **  Minus  **  PRESENT EXTRA  RATE   X \$ 25 =  X \$ 100 =  + \$ 180 =  TOTAL ADDIT. FEE  The column 1 is less than the entry in column 2, write "0" in column 3.  The column 1 is less than the entry in column 2, write "0" in column 3.  The column 1 is less than the entry in column 2, write "0" in column 3.  The column 1 is less than the entry in column 2, write "0" in column 3.	CLAMS REMAINING AFTER AMENDMENT  Minus  ***  Minus  ***  PRESENT EXTRA  PRESENT EXTRA  PRESENT EXTRA  RATE  TIONAL FEE  X \$ 25 =  X \$ 100 =  + \$ 180 =  TOTAL ADDIT. FEE  In column 1 is less than the entry in column 2, write "0" in column 3.	CLAMS REMAINING AFTER AMENDMENT  Minus  ** Minus  **   PRESENT EXTRA  RATE  RATE  TIONAL FEE  OR  X \$ 25 = OR  X \$ 100 = OR  PRESENTATION OF MULTIPLE DEPENDENT CLAIM  TOTAL ADDIT. FEE  OR  OR  TOTAL ADDIT. FEE  OR  OR  In column 1 is less than the entry in column 2, write "0" in column 3.  The sest Number Previously Paid For" in THIS SPACE is less than "20", enter "20".	CLAMS REMAINING AFTER AMENDMENT  Minus  ***    PRESENT

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